

Democratic Precinct Board Form – 2016 Primary Election

Submit to Marion County Democratic Party

155 E. Market St., Suite 400

Indianapolis, IN 46204

Phone: (317) 637-3366

Use this form to nominate your precinct election board members for the May 3 2016 Primary Election. ***Please submit by April 1st 2016.***



Reminders: Each person you nominate must:

- Be a registered voter in MARION County
- Give their name (no nicknames) and address as it appears at Voter Registration
- Show a Democratic vote in the most recent primary if they have voted in a Primary Election
- Cast an absentee vote if they are serving in a precinct other than the one where they reside
- May not be related to a candidate on the precinct's ballot

Township: _____

Ward: _____

Precinct: _____

INSPECTOR: Full Name: _____ DOB: ____/____/____

Address: _____ ZIP: _____

Cell Phone: _____ Home Phone: _____

E-mail Address: _____

Recently Moved or Changed Name? **YES NO**

If YES, please give former name and/or address: _____

JUDGE: Full Name: _____ DOB: ____/____/____

Address: _____ ZIP: _____

Cell Phone: _____ Home Phone: _____

E-mail Address: _____

Recently Moved or Changed Name? **YES NO**

If YES, please give former name and/or address: _____

CLERK: Full Name: _____ DOB: ____/____/____

Address: _____ City & Zip: _____

Cell Phone: _____ Home Phone: _____

E-mail Address: _____

Recently Moved or Changed Name? **YES NO**

If YES, please give former name and/or address: _____

Democratic Precinct Board Form – 2016 Primary Election (page 2)

Submit to Marion County Democratic Party
155 E. Market St., Suite 400
Indianapolis, IN 46204
Phone: (317) 637-3366

2nd SHIFT POSITIONS

JUDGE: Full Name: _____ DOB: ____/____/____
Address: _____ City & Zip: _____
Cell Phone: _____ Home Phone: _____
E-mail Address: _____
Recently Moved or Changed Name? YES NO
If YES, please give former name and/or address: _____

CLERK: Full Name: _____ DOB: ____/____/____
Address: _____ City & Zip: _____
Cell Phone: _____ Home Phone: _____
E-mail Address: _____
Recently Moved or Changed Name? YES NO
If YES, please give former name and/or address: _____

Please submit by April 1st, 2016. If you can't make this deadline, notify Democratic Headquarters or the Election Board office

Submitted Date: _____

Precinct Committeeman: _____

Home Phone: _____ **Cell Phone:** _____

Ward Chairman: _____

Home Phone: _____ **Cell Phone:** _____